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PTO/SB/05 (03-01)

Approved for use through 10/31/2002 OMB 0651-0032

U S Patent and Trademark Office; U S DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

First Inventor

Jeffrey Borenstein, M.D.

Title

Express Mail Label No.

1c971 U.S. PTO
10/038458

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages **7**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets ☐]
5. Oath or Declaration [Total Pages **1**]
 - a. ☒ Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - b. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: **Computer printouts**

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: _____

Prior application information:

Examiner _____

Group Art Unit. _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☐

Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒

Correspondence address below

Name

Jeffrey Borenstein, M.D.

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State

NY

Zip Code

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Country

USA

Telephone

917-853-6474

Fax

Name (Print/Type)

Jeffrey Borenstein, M.D.

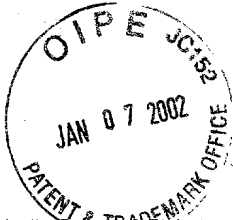
Registration No. (Attorney/Agent)

Signature

Date

10/29/01

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PTO/SB/17 (10-01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 370.00)

Complete if Known

| | |
|----------------------|--------------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Jeffrey Borenstein, M.D. |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | |

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number
Deposit Account Name

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|-----|----------------------------|----------------------------|------------------------|----------|
| 101 | 740 | 201 (370) | Utility filing fee | 370.00 |
| 106 | 330 | 206 165 | Design filing fee | |
| 107 | 510 | 207 255 | Plant filing fee | |
| 108 | 740 | 208 370 | Reissue filing fee | |
| 114 | 160 | 214 80 | Provisional filing fee | |

SUBTOTAL (1) (\$ 370.00)

2. EXTRA CLAIM FEES

| | Total Claims | Extra Claims | Fee from below | Fee Paid |
|---------------------------|----------------------|---|------------------------|----------|
| Independent Claims | <input type="text"/> | -20** = <input type="text"/> X <input type="text"/> | = <input type="text"/> | |
| Multiple Dependent Claims | <input type="text"/> | -3** = <input type="text"/> X <input type="text"/> | = <input type="text"/> | |

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |
|-----|----------------------------|----------------------------|--|
| 103 | 18 | 203 9 | Claims in excess of 20 |
| 102 | 84 | 202 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 42 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|-----|----------------------------|----------------------------|--|----------|
| 105 | 130 | 205 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 130 | Non-English specification | |
| 147 | 2,520 | 147 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 112 | 920* | 112 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 55 | Extension for reply within first month | |
| 116 | 400 | 216 200 | Extension for reply within second month | |
| 117 | 920 | 217 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 980 | Extension for reply within fifth month | |
| 119 | 320 | 219 160 | Notice of Appeal | |
| 120 | 320 | 220 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 140 | Request for oral hearing | |
| 138 | 1,510 | 138 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 230 | Design issue fee | |
| 144 | 620 | 244 310 | Plant issue fee | |
| 122 | 130 | 122 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 | 180 | 126 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

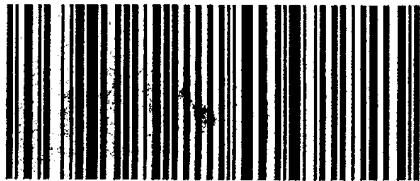
| | | | | | |
|-------------------|--------------------------|-----------------------------------|--|-----------|--------------|
| Name (Print/Type) | Jeffrey Borenstein, M.D. | Registration No. (Attorney/Agent) | | Telephone | 917-853-6474 |
| Signature | | | | Date | 10/29/01 |

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**RETURN RECEIPT
REQUESTED**

FIRST CLASS

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10/038458
01/07/02